PTO/SB/05 (08-03) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION

Attorney Docket No.		HARLE 3.0-001					
First Inventor		Sylvie Genard					
Title	METHOD FOR SYNTHESIZING KPV TRIPEPTIDE DIAMIDE DERIVATES						

TRANSMITTAL	Title 1	ETHOD FOI IAMIDE DEF		SIZI	NG KPV TRIPEPTID	E			
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express M	ail Label No.	EV 34260	8722	· US				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application con	ntents. A	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages 49] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the invention - Brief Secription of the Drawings (if filed) - Detailed Description - Claim(s) - Detailed Description - Claim(s) - Other of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 6] 5. Oath or Declaration [Total Sheets 6] - Newly executed (original or copy) - Description of the Drawing of t	9. 10. 11. 12. 13. 14. 15. 16. 17. and supply thunder 37 CFR-in-part (CIP)	Nucleotide an (if applicable, a. Compute Nucleotide an (if applicable, a. Compute Nucleotide an (if applicable, a. Compute Nucleotide an (if application is not not necessary in the Information of the Information Nucleotide Nucleoti	all necessary) uter Readable if on Sequence Li CD-ROM or CI ments verifying if DMPANYING ent Papers (co- 3.73(b) Statemeter is an assign ranslation Doco on Disclosure on Disclosure on Disclosure on Postcan be specifically if Copy of Priority individual in the company of the copy of the company of the copy of the c	d Sequence of the sequence of	pence Submission CRF) n: copies); or ii. Pape of above copies ICATION PARTS Pet & document(s)) Power of Attorney (if applicable) X Copies of iDS Citations P 503) d) ment(s) 35 U.S.C. 122 (b)(2)(B)(i). O/SB/35 or its equivalent. arch report P first sentence of the	031356 [
under Box 5b, is considered a part of the disclosure of the acconreference. The incorporation can only be relied upon when a por	npanying con rtion has beer	ntinuation or divis n inadvertently on	ional application	n and I submit	s hereby incorporated by ted application parts.				
19. CORRESPONDENCE ADDRESS									
X Customer Number: 000530		OR	Corre	sponde	ence address below				
Name			_						
Address									
City State	е		Zip Co	ode					
Country Tele	phone			Fax					
Name (Print/Type) Michael H. Teschner		Registration No	o. (Attorney/Age	nt)	32,862				
Signature		>	Date	Ja	anuary 23, 2004				

PTO/SB/17 (10-03)

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│ FEE TRANSMITTAL	.	Application Number			ŕ	Not Yet Assigned			
	Filing Date			Concurrently Herewith					
for FY 2004				d Inver		Sylvie Ge			
Effective 10/01/2003, Patent fees are subject to annual revision.			iner Na			Not Yet Assigned			
				arric					
Applicant claims small entity status. See 37 CFR 1.27	Art Unit				N/A				
TOTAL AMOUNT OF PAYMENT (\$) 1,744.00		Attom	ey Do	cket No		HARLE 3			
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (co	ntinued)		
Check Credit Money Other None None	3. A	3. ADDITIONAL FEES							
X Deposit Account:									
Deposit		e Entity		Entity	_				
Account 12-1095	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Desc	ription	Fee Paid	
Deposit Lemer, David, Littenberg,		, ,			Cumharas	'ata filing fo	a ar ooth		
Account Name Krumholz & Mentlik, LLP	1051	130	2051	65	_	– late filing fe – late provisir	e or oath onal filing fee or cover		
The Director is authorized to: (check all that apply)	1052	50	2052	25	sheet.	- late brosier	Mai ming lee or cover	i I	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	Non-English specification			
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a re	equest for ex p	parte reexamination		
	1804	920*	1804	920*			of SIR prior to		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				1,840*	Examiner a Requesting	ction publication o	of SIR after		
· '	1805	1,840*	1805		Examiner a	ction		\vdash	
FEE CALCULATION 1. BASIC FILING FEE	1251 1252	110 420	2251 2252	55 210		or reply within or reply within	\vdash		
Large Entity Small Entity	1252	950	2252	475		or reply within			
Fee Fee Fee Fee Paid	1254	1,480	2254	740			fourth month		
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255			or reply within			
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A				
1003 530 2003 265 Plant filing fee	1402	330	2402	165	-	of in support o	f an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for	quest for oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451				lic use proceeding		
SUBTOTAL (1) (\$) 770.00	1452	110	2452	55		evive – unav			
	1453	1,330	2453	665		evive - uninte			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501 1502	1,330 480	2501 2502	665 240	-	fee (or reissi	16)		
Claims below Fee Paid	1502	480 640	2502	320	Design issu Plant issue			\vdash	
	1460	130	1460	130		tions to the Commissioner			
Claims 2 3 - 1 1 1 0.00	1807	50	1807	50				\vdash	
Multiple Dependent 290.00 = 290.00						ssing fee under 37 CFR 1.17(q) ission of Information Disclosure Stmt			
Large Entity Small Entity Fee	1806	180	1806	180		ng each patent assignment per			
Code (\$) Code (\$)	8021	40	8021	40	property (tin	nes number o	of properties)		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a sub (37 CFR 1.1		final rejection		
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each ad	ditional inver			
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385		d (37CFR 1.129(b)) for Continued Examination (RCE)			
over original patent	1802		1802	900	Request for	expedited ex			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)								
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**or number previously paid, if greater, For Reissues, see above				g			AL (0) (1+/		
SUBMITTED BY						(Complete	(if applicable))		
Name (Print/Type) Michael H. Teschner		ration No		,862		T	(908) 518-6313		
	Alloni	ey/Agent)			_	Date	· · · · · · · · · · · · · · · · · · ·		
Signature						Date	January 23, 200	<i>)</i> 44	